

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, California 95814



May 9, 2005

ALL COUNTY INFORMATION NOTICE I-07-05

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY CHIEF PROBATION
OFFICERS
ALL STATE ADOPTIONS DISTRICT OFFICES

REASON FOR THIS TRANSMITTAL

- ☐ State Law Change
- ☐ Federal Law or Regulation Change
- ☐ Court Order
- ☐ Clarification Requested by one or more Counties
- ☒ Initiated by CDSS

SUBJECT: MENTAL HEALTH SERVICES ACT (MHSA)/PROPOSITION 63

REFERENCE: MHSA, WELFARE AND INSTITUTIONS CODE SECTIONS 5847, 5848
AND 5892

The purpose of this All County Information Notice is to encourage county welfare departments to participate in the local activities related to the comprehensive planning process and implementation of the Mental Health Services Act (MHSA). Each county mental health department will be required to complete a proposed three-year expenditure plan, developed with local stakeholders that include: early intervention programs; education and training needs; innovative programs; and integrated plans for prevention and a continuum of services.

Overview and Background

As you may know, the MHSA became effective January 1, 2005. The purpose of the MHSA is to transform the community mental health system and change programs that serve children, adults, and seniors. The Department of Mental Health (DMH), in consultation with other stakeholders is required to establish a statewide program designed to prevent mental illness from becoming severe and disabling. The program must improve timely access to services for underserved populations and include the following components:

1. Outreach to families, employers, primary care health care providers and others.
2. Access and linkage to medically necessary care provided by county mental health programs for children with severe mental illness.
3. Strategies to reduce:
 - a. The stigma associated with either being diagnosed with a mental illness or seeking mental health services.
 - b. Discrimination against people with mental illness.
 - c. Incarcerations, homelessness, and removal of children from their homes.

It is anticipated that the MHSA will have immediate and long term programmatic impact across various social services programs. Counties are encouraged to work with their local county mental health partners to assess unmet mental health needs and identify high priority underserved populations such as transitional foster youth, the homeless, older adults, the deaf, and the blind.

The collected revenue comes from a state personal income tax surcharge of one percent on taxpayers' annual incomes of more than \$1 million. These revenues will be placed into a Mental Health Services Fund. Funding should have increasing impact over time, with increased focus on prevention and expanded access, as well growing a revenue source. Furthermore, the expansion of county mental health services could result in creating savings on social services programs, state prison and county jail operations, medical care, and homeless shelters.

Beginning in State Fiscal Year (SFY) 2004-2005, an estimated \$12.7 million will be available to: 1) assist county mental health departments to begin the community planning process with the required stakeholders: providers of services, law enforcement, education and social services, and (2) outreach to others to ensure diversity. A minimum of \$75,000 will be made available to county mental health to ensure that small counties have resources to meet basic planning requirements. Plans were due to DMH March 15, 2005.

The Community Services and Supports component of the MHSA is projected to provide approximately \$350 million in revenue in SFY 2005-2006, for direct services and supports with additional federal matching funds estimated to be approximately 15 percent. For programs established under the MHSA, CDSS is also required to seek maximum federal funding. The California Department of Social Services (CDSS) will examine strategies to determine the efficient use of existing funding streams and the potential for leveraging MHSA funding with other federal funds.

The MHSA specifies in the Welfare and Institutions Code (W& I C) Section 5891, that "these funds shall not be used to supplant existing state or county funds utilized to provide mental health services." As such, the CDSS and individual counties will be prohibited from redirecting funds now used for mental health services for other purposes. In addition, the MHSA adds Section 18257 (b) to the W& I C wraparound statutes, that reads in part: "Funds from the Mental Health Services Fund shall be made available to the State Department of Social Services for technical assistance to counties in establishing and administering projects." The CDSS in collaboration with the counties will develop a statewide technical assistance plan to ensure that various programs align with the appropriate components of the MHSA. Most important is our effort to ensure that appropriate linkages are made to goals and activities related to our federal Performance Improvement Plan, child welfare system improvement implementation and the State outcomes and accountability process.

As the priority population(s), service needs, and performance outcomes are identified, CDSS will work closely with DMH to respond to any data and evaluation mandates. As part of the planning process, counties are encouraged to consider the relationship of existing performance measures for the State and federal well being outcomes, particularly, if local programs are established that can meet the mental health needs of families that come to the attention of the child welfare system.

The CDSS continues to actively partner with DMH to assist with the planning, implementation, and integration of the appropriate MHSA components across divisions. A summary of documents and additional information regarding the ongoing stakeholder input process, workgroups, conference calls, and plan requirements are posted on the DMH website, at www.dmh.ca.gov. Enclosed is a listing of the DMH county mental health operations contacts for the Northern and Southern regions.

If you have any questions regarding this letter, please contact Susan Nisenbaum, Chief, Child Protection, and Family Support Branch at (916) 651-6600.

Sincerely,

Original Document Signed by Barbara Eaton

BARBARA EATON
Acting Deputy Director
Children and Family Services

Enclosures

COUNTY OPERATIONS NORTH & SOUTH REGIONAL LISTING

DEPARTMENT OF MENTAL HEALTH

NORTH/BAY

JoAnn McLevis, Chief

(916) 654-6605

Bay Region

Ruth Walz (Regional Lead) (707) 252-3168
Contra Costa, San Mateo, Solano, *Sacramento

Peter Best (916) 657-3487
Alameda, Monterey, Napa, San Benito, San Francisco, *Fresno

Douglas Mudgett (916) 654-3623
Marin, Santa Clara, Santa Cruz, Sonoma, *San Joaquin

Northern Region

Kathleen Carter (Regional Lead) (916) 651-6613
*Butte *Colusa, Del Norte, Inyo, Lake, Lassen, Mendocino, *Modoc,
Nevada, Plumas, Trinity

Harold Curtis (916) 654-1206
Glenn, Humboldt, Shasta, Siskiyou, Tehama
(Sierra – see Central / Lori Hokerson)

SOUTH/CENTRAL

John Lessley, Chief

(916) 654-3535

Central Region

Lori Hokerson (Acting Lead) (916) 651-6296
Amador, El Dorado, Merced, Placer (Sierra MHP), Stanislaus,
Sutter-Yuba, Tulare, Yolo

Linda Brophy (916) 654-7357
Alpine, Calaveras, Madera, Mariposa, Mono, Kings, Tuolumne

***Pete Best** (916) 657-3487
Fresno

***Douglas Mudgett** (916) 654-3623
San Joaquin

***Ruth Walz** (707) 252-3168
*Sacramento

Southern Region

Eddie Gabriel (Regional Lead) (916) 654-3263
Imperial, Orange, Los Angeles, San Diego, Ventura

Troy Konarski (916) 654-2643
Kern, Riverside, San Bernardino, San Luis Obispo, Santa Barbara

**Temporary Assigned Counties*